

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
<b>CLAIMS</b>													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1												
2		1											
3		2											
4		2	2										
5		3	2										
6		0											
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12		1											
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TOTAL DEP.	4	3											
TOTAL CLAIMS	4	7											
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\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS